



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Build the Bench PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		<input type="text" value="31858.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="19581.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="28000.00"/>	<input type="text" value="65200.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="47581.49"/>	<input type="text" value="97058.45"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20117.37"/>	<input type="text" value="69594.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27464.12"/>	<input type="text" value="27464.12"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Build the Bench PAC**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6900.00	32300.00
(ii) Unitemized .....	750.00	900.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7650.00	33200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	20350.00	30350.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28000.00	63550.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1650.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	28000.00	65200.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	28000.00	65200.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6867.37	54344.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6867.37	54344.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	13250.00	13250.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20117.37	69594.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20117.37	69594.33

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	28000.00	63550.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28000.00	63550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6867.37	54344.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1650.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6867.37	52694.33

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Barnes, Dwight, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2023
Mailing Address 14 Olympic Ct			<b>Transaction ID : SA11AI.4548</b>
City New Orleans	State LA	Zip Code 70131	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Crescent Crown Distributing		Occupation (for Individual) Public Relations Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Davis, Sayonara, P., ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2023
Mailing Address 72 Yellowstone Dr.			<b>Transaction ID : SA11AI.4540</b>
City New Orleans	State LA	Zip Code 70131	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Self		Occupation (for Individual) Buyer/Traveler	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Deep South Political Consulting LLC</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 24 / 2023
Mailing Address 909 Poydras Street Suite 1825			<b>Transaction ID : SA11AI.4552</b>
City New Orleans	State LA	Zip Code 70112	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. Spears, Ike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 909 Poydras St  
 Ste 1850  
 City New Orleans State LA Zip Code 70112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Consultant  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2023  
**Transaction ID : SA11AI.4552.0**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Farac, Sinajka, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 102 Sherwood Dr.  
 City Belle CHase State LA Zip Code 70037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2023  
**Transaction ID : SA11AI.4579**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

**C. Green, Eugene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4939 St Roch Ave  
 City New Orleans State LA Zip Code 70122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) City of New Orleans Occupation (for Individual) City Councilmember  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 16 / 2023  
**Transaction ID : SA11AI.4625**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Grubb, Broderick, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 09 / 2023 <b>Transaction ID : SA11AI.4567</b>
Mailing Address 7807 Jeannette St.		Amount of Each Receipt this Period 300.00
City New Orleans	State LA	Zip Code 70118
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) BRK INS. Group	Occupation (for Individual) Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Harris, Lesli, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 16 / 2023 <b>Transaction ID : SA11AI.4635</b>
Mailing Address 2612 Baronne St		Amount of Each Receipt this Period 300.00
City New Orleans	State LA	Zip Code 70113
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Kelly Hart	Occupation (for Individual) Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Heebe, Frederick, , ,</b>		Date of Receipt MM / DD / YYYY 11 / 16 / 2023 <b>Transaction ID : SA11AI.4633</b>
Mailing Address 5531 St Charles Ave		Amount of Each Receipt this Period 300.00
City New Orleans	State LA	Zip Code 70115
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) River Birch LLC	Occupation (for Individual) Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. Heyman, Kristi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1529 Nashville Ave  
 City New Orleans State LA Zip Code 70115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 09 / 2023  
**Transaction ID : SA11AI.4562**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**B. Lousteau, Stacey, M, Mrs.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1013 Pasadena Ave.  
 City Metairie State LA Zip Code 70001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Entergy Occupation (for Individual) Senior Manager Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 24 / 2023  
**Transaction ID : SA11AI.4557**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**C. Lyons, Rodney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3813 Accacia Lane  
 City Harvey State LA Zip Code 70258  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Not Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2023  
**Transaction ID : SA11AI.4533**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. McDonald, Alden, J., Mr., Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6600 Plaza Dr.  
 City New Orleans State LA Zip Code 70127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Liberty Banks Trust Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2023  
**Transaction ID : SA11Al.4544**  
 Amount of Each Receipt this Period  
 600.00  
 Memo Item

**B. Moreno, Helena, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 625 St. Charles Ave  
 City New Orleans State LA Zip Code 70130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) City of New Orleans Occupation (for Individual) City Council Member  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2023  
**Transaction ID : SA11Al.4538**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Peachey, Christy, Verges, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 312 Independence Dr  
 City Mandeville State LA Zip Code 70471  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Peachey Mobility Fitness Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2023  
**Transaction ID : SA11Al.4528**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. Primeaux, Russell, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 Westgate Rd.  
 City Lafayette State LA Zip Code 70506  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Kean Miller Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2023  
**Transaction ID : SA11AI.4546**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Rutledge, Domoine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 66551  
 City Baton Rouge State LA Zip Code 70896  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSRS, LLC Occupation (for Individual) Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2023  
**Transaction ID : SA11AI.4527**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Stant, Christopher, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 377 Forest Brook Blvd  
 City Mandeville State LA Zip Code 70448  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Woodglen Development Occupation (for Individual) Developer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2023  
**Transaction ID : SA11AI.4530**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	900.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Stokes and Associates**

Mailing Address 246 Garden Rd.

City River Ridge	State LA	Zip Code 70123
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 06 / 2023

**Transaction ID : SA11AI.4669**

Amount of Each Receipt this Period  
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stokes, Larry, , ,**

Mailing Address 3501 N Causeway Blvd Suite 900

City Metairie	State LA	Zip Code 70002
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Stokes & Associates	Occupation (for Individual) Doctor
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 06 / 2023

**Transaction ID : SA11AI.4669.0**

Amount of Each Receipt this Period  
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tulane & Broad and Associates**

Mailing Address 1318 Roaund Oak Ct.

City Mclean	State VT	Zip Code 22101
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 09 / 2023

**Transaction ID : SA11AI.4565**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. Greenstone, Aaron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1318 Round Oak Ct  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bancroft Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2023  
**Transaction ID : SA11AI.4565.0**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Ty Bromell LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5321 Riverbend Blvd  
 City Baton Rouge State LA Zip Code 70820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2023  
**Transaction ID : SA11AI.4627**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**C. Bromell, Ty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5321 Riverbend Blvd  
 City Baton Rouge State LA Zip Code 70820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Louisiana Lobbying Solutions Occupation (for Individual) Managing Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 16 / 2023  
**Transaction ID : SA11AI.4627.0**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6900.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Committee to Elect Byron Lee**

Mailing Address 2439 Manhattan Blvd.  
Suite 507

City Harvey	State LA	Zip Code 70058
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2023

**Transaction ID : SA11C.4534**

Amount of Each Receipt this Period  
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Committee to Elect Joseph Lopinto**

Mailing Address 2016 Persimmon Avenue

City Metairie	State LA	Zip Code 70001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 01 / 2023

**Transaction ID : SA11C.4570**

Amount of Each Receipt this Period  
600.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ENERGY CORPORATION POLITICAL ACTION COMMITTEE (ENPAC)**

Mailing Address 425 WEST CAPITOL AVENUE, STE24B

City LITTLE ROCK	State AR	Zip Code 72201
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00363879

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2023

**Transaction ID : SA11C.4581**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2400.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Friends of Oliver Thomas</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 16 / 2023 <b>Transaction ID : SA11C.4631</b>
Mailing Address PO Box 870235		Amount of Each Receipt this Period 150.00
City New Orleans	State LA	Zip Code 70187
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. INTERNATIONAL ASSOCIATION OF SHEET METAL, AIR, RAIL AND TRANSPORTATION WORKERS POLITICAL A</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 30 / 2023 <b>Transaction ID : SA11C.4610</b>
Mailing Address 1750 NEW YORK AVENUE, NW SUITE 600		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C C00007542		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2023 <b>Transaction ID : SA11C.4613</b>
Mailing Address 900 SEVENTH ST, NW		Amount of Each Receipt this Period 5000.00
City WASHINGTON	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00027342		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
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FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2023

**Transaction ID : SA11C.4616**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Sharon Weston Broome Mayor-President Fund**

Mailing Address P.O. Box 52783

City Baton Rouge	State LA	Zip Code 70892
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2023

**Transaction ID : SA11C.4577**

Amount of Each Receipt this Period  
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2023

**Transaction ID : SA11C.4622**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	20350.00



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Build the Bench PAC**

Full Name (Last, First, Middle Initial)

### A. Angerholzer Broz Consulting LLC

Mailing Address 499 S Capitol St SW  
Suite 420

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Fundraising Consulting Fees and Reimbursed Expenses

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4594**

Amount of Each Disbursement this Period

[REDACTED] 540.81

Memo Item

Full Name (Last, First, Middle Initial)

### B. Angerholzer Broz Consulting LLC

Mailing Address 499 S Capitol St SW  
Suite 420

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement

Compliance Fee

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4594.C**

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Intuit

Mailing Address 2632 Marine Way

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement

Accounting Software

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	7		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4594.**

Amount of Each Disbursement this Period

[REDACTED] 40.81

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

[REDACTED] 540.81

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4595</b> Amount of Each Disbursement this Period [ ] 1081.62
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Fundraising Consulting Fees and Reimbursed Expenses		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4595.c</b> Amount of Each Disbursement this Period [ ] 500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Compliance Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4595.</b> Amount of Each Disbursement this Period [ ] 500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Compliance Fee		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1081.62
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial) <b>A. Intuit</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2023
Mailing Address 2632 Marine Way		FEC Identification Number C <b>Transaction ID : SB21B.4595.3</b> Amount of Each Disbursement this Period 40.81
City Mountain View	State CA	
Zip Code 94043		Category/ Type
Purpose of Disbursement Accounting Software		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Intuit</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2023
Mailing Address 2632 Marine Way		FEC Identification Number C <b>Transaction ID : SB21B.4595.3</b> Amount of Each Disbursement this Period 40.81
City Mountain View	State CA	
Zip Code 94043		Category/ Type
Purpose of Disbursement Accounting Software		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 04 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C <b>Transaction ID : SB21B.4596</b> Amount of Each Disbursement this Period 544.52
City Washington	State DC	
Zip Code 20003		Category/ Type
Purpose of Disbursement Fundraising Consulting Fees and Reimbursed Expenses		
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	544.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
Build the Bench PAC

Form A: Angerholzer Broz Consulting LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Date of Disbursement (10/04/2023). Transaction ID: SB21B.4596.1. Amount: 500.00.

Form B: Intuit. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Date of Disbursement (10/04/2023). Transaction ID: SB21B.4596.1. Amount: 44.52.

Form C: Angerholzer Broz Consulting LLC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, and Date of Disbursement (12/05/2023). Transaction ID: SB21B.4597. Amount: 2085.40.

SUBTOTAL of Disbursements This Page (optional) 2085.40
TOTAL This Period (last page this line number only)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial) <b>A. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C <b>Transaction ID : SB21B.4597.1</b> Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Compliance Fee	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Angerholzer Broz Consulting LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2023
Mailing Address 499 S Capitol St SW Suite 420		FEC Identification Number C <b>Transaction ID : SB21B.4597.1</b> Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Compliance Fee	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Intuit</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2023
Mailing Address 2632 Marine Way		FEC Identification Number C <b>Transaction ID : SB21B.4597.1</b> Amount of Each Disbursement this Period 44.52
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Accounting Software	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. Intuit**

Full Name (Last, First, Middle Initial)

Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Accounting Software

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4597.:

Amount of Each Disbursement this Period: 44.52

Memo Item

**B. Bobbleheads.com**

Full Name (Last, First, Middle Initial)

Mailing Address 5885 Shiloh Road Suite 101

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement Fundraiser Gifts

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4597.4

Amount of Each Disbursement this Period: 996.36

Memo Item

**C. Reese, Dorothy, F, ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4824 Bancroft Drive

City New Orleans State LA Zip Code 70122

Purpose of Disbursement Reimbursable Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 11 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4598

Amount of Each Disbursement this Period: 373.53

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 373.53

**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 Lenfant Plaza SW

City  
Washington

State  
DC

Zip Code  
20260

Purpose of Disbursement

PO Box

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 11 / 2023

FEC Identification Number

C

Transaction ID : SB21B.4598.1

Amount of Each Disbursement this Period

176.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. UPS**

Mailing Address 55 Glenlake Parkway NE

City  
Atlanta

State  
GA

Zip Code  
30328

Purpose of Disbursement

Shipping

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 11 / 2023

FEC Identification Number

C

Transaction ID : SB21B.4598.1

Amount of Each Disbursement this Period

197.53

Memo Item

Full Name (Last, First, Middle Initial)

**C. Reese, Dorothy, F, ,**

Mailing Address 4824 Bancroft Drive

City  
New Orleans

State  
LA

Zip Code  
70122

Purpose of Disbursement

Reimbursable Expenses

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 22 / 2023

FEC Identification Number

C

Transaction ID : SB21B.4600

Amount of Each Disbursement this Period

2151.49

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

2151.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

**A. amazon**

Full Name (Last, First, Middle Initial)

Mailing Address 410 Terry Ave N

City Seattle State WA Zip Code 98109

Purpose of Disbursement  
Event Decorations and Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 22 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4600.1

Amount of Each Disbursement this Period: 1487.80

Memo Item

**B. Mignon Faget**

Full Name (Last, First, Middle Initial)

Mailing Address 3301 Veterans Memorial Blvd

City Metairie State LA Zip Code 70002

Purpose of Disbursement  
Event Decorations and Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 22 / 2023

FEC Identification Number: C

Transaction ID : SB21B.4600.1

Amount of Each Disbursement this Period: 663.69

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period: 0.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶ 6777.37



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial)

**A. Congressional Black Caucus Institute**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2023			

Mailing Address

City State Zip Code

FEC Identification Number

**C** [ ]

**Transaction ID : SB29.4608**

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

Purpose of Disbursement

Political Contribution

[ ]

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAN KILDEE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			03			2023			

Mailing Address P.O. BOX 248

City State Zip Code  
FLINT MI 48501

FEC Identification Number

**C** C00499947

**Transaction ID : SB29.4606**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Purpose of Disbursement

Political Contribution

[ ]

Category/  
Type

Candidate Name

KILDEE, DANIEL T, , ,

Office Sought:  House  Senate  President

Disbursement For: 2024  Primary  General  Other (specify)

State: MI District: 08

Full Name (Last, First, Middle Initial)

**C. Louisiana Democratic Party**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			10			2023			

Mailing Address

City State Zip Code

FEC Identification Number

**C** [ ]

**Transaction ID : SB29.4603**

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

[ ] 11000.00

**TOTAL** This Period (last page this line number only)..... ▶

[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Build the Bench PAC**

Full Name (Last, First, Middle Initial) <b>A. Mystic Krewe of Louisianans</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2023
Mailing Address 8941 Jefferson Highway Suite 200		FEC Identification Number C [ ] <b>Transaction ID : SB29.4605</b> Amount of Each Disbursement this Period [ ] 850.00
City Baton Rouge	State LA	Zip Code 70809
Purpose of Disbursement Event Tickets		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Mystic Krewe of Louisianans</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2023
Mailing Address 8941 Jefferson Highway Suite 200		FEC Identification Number C [ ] <b>Transaction ID : SB29.4602</b> Amount of Each Disbursement this Period [ ] 1400.00
City Baton Rouge	State LA	Zip Code 70809
Purpose of Disbursement Event Tickets		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]
City	State	Zip Code
Purpose of Disbursement		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ] 13250.00